

HIV testing among pregnant women in Massachusetts, 2007

HIV testing among pregnant women in Massachusetts (MA)

- Women infected with human immunodeficiency virus (HIV) can transmit the virus to their babies during pregnancy, labor & delivery and breastfeeding. This is called *perinatal HIV transmission*.
- From 2000 to 2006, thirteen cases of perinatal HIV transmission were reported in MA.¹
- In most cases, the risk of perinatal HIV transmission can be reduced by administering anti-retroviral drugs to the mother during pregnancy and labor & delivery, and to the newborn immediately after delivery.
- The Massachusetts Department of Public Health in accordance with the American College of Obstetrics and Gynecology (ACOG) recommends that all pregnant women receive HIV counseling and testing, regardless of providers' or women's perception of risk.²
- Overall, less than 60%* of women responding to the 2007 MA PRAMS survey reported that they had received an HIV test while they were pregnant, and 77% of women indicated that a health care worker discussed HIV testing during their prenatal care visits (Figure 1 & 2).

Figure 1. HIV testing among pregnant women, MA PRAMS, 2007

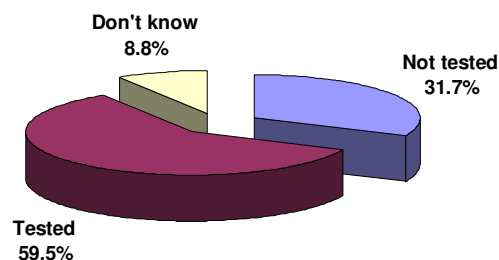


Figure 2. Prenatal HIV counseling among pregnant women, MA PRAMS, 2007

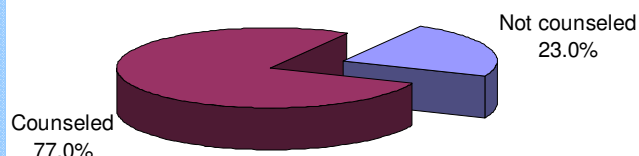
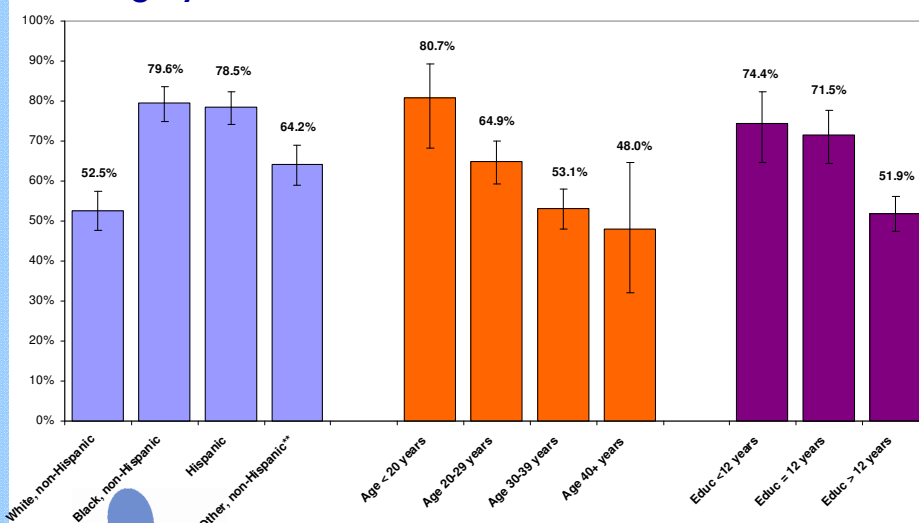


Figure 3. Percent* of pregnant women receiving HIV testing by maternal characteristic, MA PRAMS, 2007



Who is most likely to be tested for HIV during pregnancy?

The rate of HIV testing was highest among mothers who were:

- ✓ Black, non-Hispanic (79.6%);
- ✓ Under age 20 years (80.7%); and
- ✓ With less than 12 years of education (74.4%) (Figure 3).



* All percentages are population-weighted.

** Includes Asian/Pacific Islander, American Indian, and other race/ethnicity.



HIV testing among pregnant women in MA, 2007 (cont'd)

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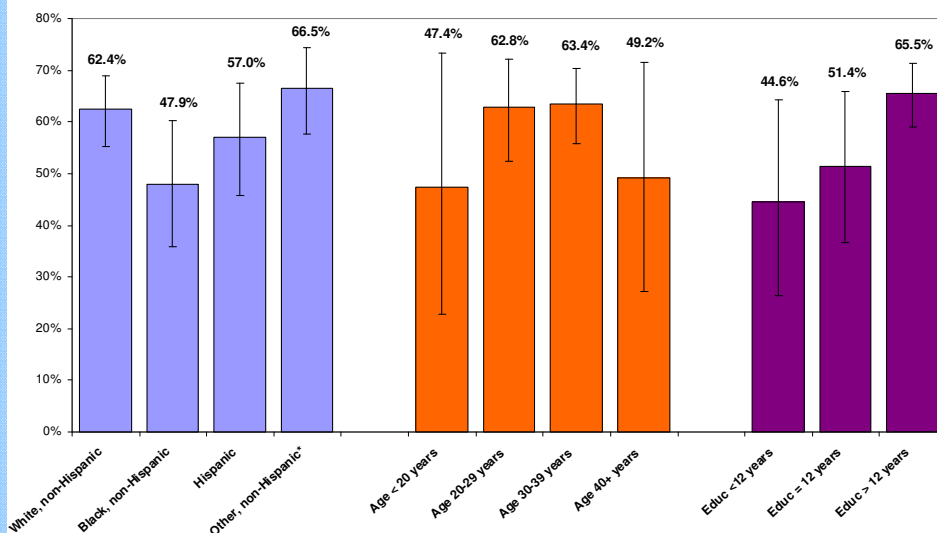
Who was not offered HIV testing?

Among women who reported not being tested for HIV during their most recent pregnancy, 62% reported that they were not offered the test.

Most likely to not be offered the test included women who were:

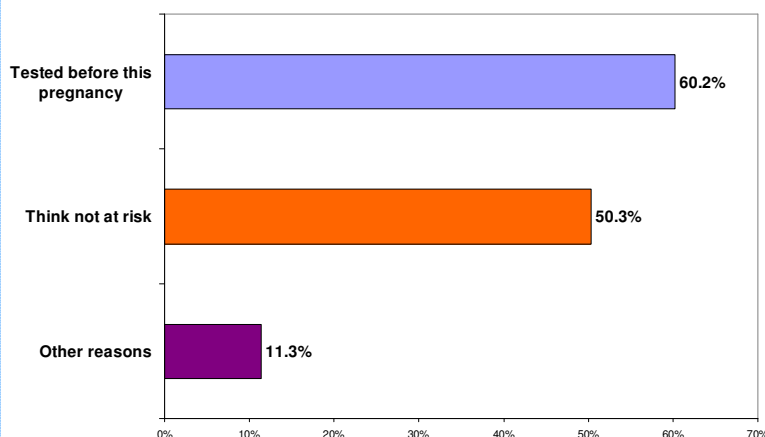
- ✓ Other, non-Hispanic* race/ethnicity (66.5%);
- ✓ Age 30-39 years (63.4%); and
- ✓ 12 years or more education (65.5%) (Figure 4).

Figure 4. Percent of pregnant women not tested for HIV who were not offered testing, by maternal characteristics, MA PRAMS, 2007



* Includes Asian/Pacific Islander, American Indian, and other race/ethnicity.

Figure 5. Reasons* for declining HIV testing among women who refused, MA PRAMS, 2007



Why do some women decline the HIV test?

Among women who were not tested for HIV but indicated that they were offered a test, 73% reported that they declined the test. The two most frequent reasons for declining were:

- ✓ Tested before this pregnancy (60.2%); and
- ✓ Thinking they were not at risk (50.3%)* (Figure 5).

* Percent of responses > 100% because respondents were allowed to cite more than one reason for declining testing.



HIV testing among pregnant women in MA, 2007 (cont'd)

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Conclusions

- PRAMS data suggest that rates of HIV testing differed by mothers' race/ethnicity, age and education level.
- While it is recommended that all pregnant women be tested for HIV, almost one in five women were *not offered* HIV testing during pregnancy.
- The top reasons mothers gave for declining an HIV test during pregnancy, were 1) having had an HIV test in the past, and 2) not believing oneself to be at risk.

Recommendation/Resource

- In order to comply with ACOG recommendations which call for every pregnant woman to be tested for HIV, healthcare providers should encourage *all* pregnant women in their care to be tested for HIV, regardless of race/ethnicity, education, age, perceived risk, a test prior to pregnancy or other factors.
- Clinical Advisory Update About Routine Counseling & Testing of Pregnant Women, <http://www.mass.gov/dph/aids>.

Study Limitations

- This report relies on self-report of HIV testing, which may differ from information found in medical records.
- PRAMS is a self-report survey and some mothers may recall experiences more or less accurately than others.
- While PRAMS is weighted to reflect the population of MA as a whole, 30% of women did not respond to this survey and we have no way of knowing how they might have answered the questions.
- PRAMS is only available in English and Spanish in MA, and may not be accessible to mothers who speak other languages.

References

1. MA Dept. of Public Health, HIV/AIDS Surveillance Program data, 2006.
2. Clinical advisory on routine HIV counseling & testing of pregnant women, MDPH, June 17, 2008.

For more PRAMS information, contact:

Emily Lu
MDPH Bureau of Family Health & Nutrition
250 Washington Street, Boston, MA 02108
emily.lu@state.ma.us
<http://www.mass.gov/dph/prams>



ABOUT MASSACHUSETTS PRAMS

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The Massachusetts Pregnancy Risk Assessment Monitoring System (PRAMS) is a collaborative surveillance project between the CDC and Massachusetts Department of Public Health. PRAMS collects state-specific, population-based data on maternal attitudes and experiences before, during, and shortly after pregnancy. The goal of the PRAMS project is to improve the health of mothers and infants by reducing adverse outcomes such as low birth weight, infant mortality and morbidity, and maternal morbidity.

The PRAMS survey is distributed throughout the year, by mail or phone, to MA residents who delivered a live infant in Massachusetts. Annually, approximately 2,400 women are randomly selected to participate from a frame of eligible birth certificates. Minority women are over sampled to ensure adequate representation. Final results are weighted to represent the entire cohort of MA resident women who delivered a live infant during the previous calendar year.

